

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MC		2-28-01
O.I.P.E. CLASSIFIER	MB	13	7/01
FORMALITY REVIEW	MM	920	08-20-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

DPW  
 cancel  
 DPW  
 cancel

Claim	Date
Final	
Original	
1	08/01/01
2	08/01/01
3	08/01/01
4	08/01/01
5	08/01/01
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8	08/01/01
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50	08/01/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

(1 FEET INSIDE)

Rest Available Cor

530  
 4-21-01